

RECEIVED USDC
CLERK, CHARLESTON, SCIN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF SOUTH CAROLINA

2019 JUL 23 AM 8:43

Fred Freeman

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

-against-

Director Sterling (SCDC),
Deputy Director McCall,
Warden Davis, Associate

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names. Do not include addresses here.) **PLEASE SEE ATTACH**

Complaint for Violation of Civil
Rights
(Prisoner Complaint)Case No. : 9:19-cv-2062-DCN-BM
(to be filled in by the Clerk's Office)Jury Trial: ☒ Yes ☐ No
(check one)

NOTICE

Federal Rules of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

Except as noted in this form, plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

When submitted for filing, your complaint should be accompanied by the full filing fee or an application to proceed in *forma pauperis*.

FF.
PAGE ONE CONTINUES

Warden Andrea Thompson,
Operation Coordinator, John Doe, or Jane Doe,
Emmett Lillian, P.N.N.

Nurse - Jane Doe,
Medical Director, John Doe, or Jane Doe,
South Carolina Department of Corrections

FF

I. The Parties to This Complaint

A. The Plaintiff(s)

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name

Fred Freeman

All other names by which you have been known:

ID Number

235186

Current Institution

Lieber Corr Inst

Address

P.O. Box 205
Ridgeville, S.C. 29472

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. Make sure that the defendant(s) listed below are identical to those contained in the above caption. For an individual defendant, include the person's job or title (if known) and check whether you are bringing this complaint against them in their individual capacity or official capacity, or both. Attach additional pages if needed.

Defendant No. 1

Name

Sterling et alJob or Title
(if known)Director

Shield Number

Employer

Address

South Carolina DEPT of Corr
P.O. Box 21787-4444 Broad
River Rd, Columbia, S.C. 29221

Individual capacity



Official capacity

Defendant No. 2

Name

Michael McCall

FF.
PLEASE SEE
ATTACH

Job or Title
(if known)

Deputy director (SCDC)

Shield Number

Employer

Address

South Carolina Department of
Corrections, 4344 Broad River
Rd, Columbia, S.C. 29210



Individual capacity



Official capacity

Defendant No. 3

Name

Warden Davis

Job or Title
(if known)

Warden

Shield Number

Employer

Address

South Carolina Department of
Corrections, 4344 Broad River Rd
Columbia, S.C. 29210



Individual capacity



Official capacity

Defendant No. 4

Name

Andrea Thompson

Job or Title
(if known)

Associate Warden

Shield Number

Employer

Address

South Carolina Department of
Corrections, 4344 Broad River Rd
Columbia, S.C. 29210



Individual capacity



Official capacity

II. Basis for Jurisdiction

Under 42 U.S.C. § 1983, you may sue state or local officials for the “deprivation of any rights, privileges, or immunities secured by the Constitution and [federal laws].” Under *Bivens v. Six Unknown Named Agents of Federal Bureau of Narcotics*, 403 U.S. 388 (1971), you may sue federal officials for the violation of certain constitutional rights.

Fif.

PAGE THREE CONTINUES

Defendant No. 5

Name Jane Doe, or John Doe
 Job Title Operation Coordinator
 (if known) _____
 Shield Number _____
 Employer South Carolina Department of
Corrections, 4344 Broad River Rd
 Address Columbia, S.C. 29210
☒ Individual Capacity ☒ Official Capacity

Defendant No. 6

Name Emmett Lillian
 Job Title Practitioner, N.W.
 (if known) _____
 Shield Number _____
 Employer South Carolina Department of
 Address Corrections 4344 Broad River Rd.
Columbia, S.C. 29210
☒ Individual Capacity ☒ Official Capacity

Defendant No. 7

Name Jane Doe
 Job Title Nurse
 (if known) _____
 Shield Number _____
 Employer South Carolina Department of
 Address Corrections, 4344 Broad River Rd.
Columbia, S.C. 29210
☒ Individual Capacity ☒ Official Capacity

ff.

PAGE THREE CONTINUES

Defendant No. 8

Name John Doe, or Jane Doe
 Job Title Medical Director
 (if known) _____
 Shield Number _____
 Employer South Carolina Department of Corr
 Address ection 4344 Broad River Rd,
Columbia, S.C. 29210

☒ Individual Capacity ☒ Official Capacity

Defendant No. 9

Name South Carolina Dept of Corr
 Job Title _____
 (if known) _____
 Shield Number Government
 Employer SCDC
 Address 4344 Broad River Rd,
xx29221 4444 Broad River Rd 29210 xx
29221

☒ Individual Capacity ☒ Official Capacity

(#F-1-1)

A. Are you bringing suit against (check all that apply):

- ☐ Federal officials (a *Bivens* claim)
- ☒ State or local officials (a § 1983 claim)

B. Section 1983 allows claims alleging the "deprivation of any rights, privileges, or immunities secured by the Constitution and [federal laws]." 42 U.S.C. § 1983. If you are suing under section 1983, what federal constitutional or statutory right(s) do you claim is/are being violated by state or local officials?

Eighth, Fourteenth Amendments of
of United States Constitution,
Negligences, civil rights violations

C. Plaintiffs suing under *Bivens* may only recover for the violation of certain constitutional rights. If you are suing under *Bivens*, what constitutional right(s) do you claim is/are being violated by federal officials?

D. Section 1983 allows defendants to be found liable only when they have acted "under color of any statute, ordinance, regulation, custom, or usage, of any State or Territory or the District of Columbia." 42 U.S.C. § 1983. If you are suing under section 1983, explain how each defendant acted under color of state or local law. If you are suing under *Bivens*, explain how each defendant acted under color of federal law. Attach additional pages if needed.

PLEASE SEE Attach
Medical and Prison officials Violated
their own Policies, Violated Federal
Regulations, Disability Act, causing injuries,

III. Prisoner Status

Indicate whether you are a prisoner or other confined person as follows (check all that apply):

- ☐ Pretrial detainee
- ☐ Civilly committed detainee
- ☐ Immigration detainee

A. Are you bringing suit against (check all that apply)?

☐ Federal officials (a Bivens claim)

☒ State or local officials (a § 1983 claim)

B. Section 1983 allows claims alleging the "deprivation of any rights, privileges, or immunities secured by the constitution and [Federal laws]." 42 U.S.C. § 1983. If you are suing under Section 1983, what federal constitutional or statutory rights do you claim is/are being violated by state or local officials?

EIGHTH, FOURTEENTH UNITED STATES
CONSTITUTIONAL AMENDMENTS

C. Plaintiff suing under Bivens may only recover for the violation of certain constitutional rights. If you are suing under Bivens, what constitutional right(s) do you claim is/are being violated by federal officials?

D. Section 1983 allows defendants to be found liable only when they have acted "under color of any statute, ordinance, regulation, custom, or usage of any state or Territory or District of Columbia." 42 U.S.C. § 1983. If you are suing under 1983, explain how each defendant acted under color of state or local law. If you are suing under Bivens, explain how each defendant acted under color of federal law. Attach additional pages if needed.

DEFENDANTS VIOLATED - AMERICAN DISABILITY
ACT, REGULATIONS, FEDERAL ADA - REGULATIONS,
POLICES, APPENDIX II - III, AND THEIR OWN - →

III. Prisoner Status, → POLICIES

Indicate whether you are a prisoner or other confined person as follows (check all that apply):

☐ Pretrial detainee

☐ Civilly committed detainee

☐ Immigration detainee

PAGE FOUR CONTINUES
JURISDICTION OF COURT

Policies - 21.04, and South Carolina
Department of corrections Division
of Health Service, (SCDC) M-116.

Prison and medical officials
knew they were operating in violations
to Federal ADA, APPENDIXES II, III,
4.10 Regulations, causing injuries
to Plaintiff Portable Femur-Hip-
Left, Traumas to Plaintiff
Disable Lumbar-right.

- FF
- ☒ Convicted and sentenced state prisoner
- ☐ Convicted and sentenced federal prisoner
- ☐ Other (explain) _____

IV. Statement of Claim

State as briefly as possible the facts of your case. Describe how each defendant was personally involved in the alleged wrongful action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

PLEASE SEE ATTACH

- A. If the events giving rise to your claim arose outside an institution, describe where and when they arose.

N/A

- B. If the events giving rise to your claim arose in an institution, describe where and when they arose.

Kirkland Correctional Institution - T2 -
Evaluation Center September 01, 2017
Daily - October 23, 2017

- C. What date and approximate time did the events giving rise to your claim(s) occur?

From September 01, 2017 continues

- D. What are the facts underlying your claim(s)? (For example: What happened to you? Who did what? Was anyone else involved? Who else saw what happened?)

1. Plaintiff is Under American Disability Act, was Placed upon OLD COUNTY AND C-1 Unit - UP - stairs, was Forced

FF-
PAGE FIVE CONTINUES
JURISDICTION OF COURT

to climb stairs in unit, outside units
UNEVEN SURFACES UPON OLD COURT YARD,
causing injuries to Surgical Portable
Femur. Hip - Left; Lumbar - Right,
Injuries Pain and Suffering

2. Evidence will Prove named defendant(s)
violated Federal Regulations 4.10,
APPENDIX'S II, III ALSO of American
Disability Act, causing injuries
to Plaintiff.

3. Evidence will Prove defendant(s)
violated their own Policies. O.P. 21.04;
South Carolina Division, South Carolina
Division of Health Service MHC.
MHC AS ABOVE CAUSING INJURIES,

Defendants Proceeded by such forms
of deliberate indifference with
culpable state of minds, of
operating under UNCONSTITUTIONAL
CONDITIONS; UNCONSTITUTIONAL
POLICIES, causing serious injuries,
Femur. Hip - Left; Lumbar
Right, violations to 8.14
CONST. AMENDS, CIVIL RIGHTS,

FF,
to climb stairs in unit, outside unit's
UNEVEN-SURFACES UPON OLD COURTYARD,
CAUSING INJURIES TO SURGICAL PORTABLE
FEMUR-HIP-LEFT, LUMBAR-RIGHT-

V. Injuries

If you sustained injuries related to the events alleged above, describe your injuries and state what medical treatment, if any, you required and did or did not receive.

Daily distances walking, climbing, wear
Tear to Portable Femur-HIP-LEFT; LUMBAR
RIGHT; SERIOUS PAIN-TRAUMAS.

SEPTEMBER 19-2017 PHYSICAL EXAMINATION
BY EMEU LILIAN, SAME DAY WAS SUPPOSE
TO RECEIVE WALKER, OCTOBER 16, 2017 WAS
DAY RECEIVED, NO FURTHER MEDICAL
TREATMENT PROVIDED, FOR SERIOUS MEDICAL
CONDITIONS.

VI. Relief

State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statutes. If requesting money damages, include the amounts of any actual damages and/or punitive damages claimed for the acts alleged. Explain the basis for these claims.

FOR DAMAGES, FOR OPERATING UPON UN-
CONSTITUTIONAL POLICIES, UNCONSTITU-
TIONAL CONDITIONS, PLAINTIFF DEMANDS
ONE HUNDRED AND FIFTY MILLION
DOLLARS, TO ENCLUDE INJUNCTION
RELIEF, AS PREVENTIVE.

VII. Exhaustion of Administrative Remedies Administrative Procedures

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted."

Administrative remedies are also known as grievance procedures. Your case may be dismissed if you have not exhausted your administrative remedies.

- ##
- A. Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?

☒ Yes
☐ No

If yes, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s).

Kirkland Correctional Re-Evaluation
Center, September 01/2017, October
23/2017,

- B. Does the jail, prison, or other correctional facility where your claim(s) arose have a grievance procedure?

☒ Yes
☐ No
☐ Do not know

- C. Does the grievance procedure at the jail, prison, or other correctional facility where your claim(s) arose cover some or all of your claims?

☒ Yes
☐ No
☐ Do not know

If yes, which claim(s)?

Civil Rights Violations, Deliberate
Indifferences, Negligence

- D. Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose concerning the facts relating to this complaint?

☒ Yes
☐ No

If no, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility?

☒ Yes

☐ No

E. If you did file a grievance:

1. Where did you file the grievance?

Lieber Correctional Institution

2. What did you claim in your grievance?

Prison officials violated their own policies, Federal violations were discovered after step one was presented.

3. What was the result, if any?

Lieber grievance coordinator, alleged, I violated time limit to file, to present grievance, Policy grievance applicable any time

4. What steps, if any, did you take to appeal that decision? Is the grievance process completed? If not, explain why not. (Describe all efforts to appeal to the highest level of the grievance process.)

Grievance coordinator of Lieber would not provide step two grievance.

FF.

F. If you did not file a grievance:

1. If there are any reasons why you did not file a grievance, state them here:

N/A

2. If you did not file a grievance but you did inform officials of your claim, state who you informed, when and how, and their response, if any:

N/A

G. Please set forth any additional information that is relevant to the exhaustion of your administrative remedies.

policy grievance is applicable any time, grievance coordinator refused to provide step two grievance.

(Note: You may attach as exhibits to this complaint any documents related to the exhaustion of your administrative remedies.)

VIII. Previous Lawsuits

The "three strikes rule" bars a prisoner from bringing a civil action or an appeal in federal court without paying the filing fee if that prisoner has "on three or more prior occasions, while incarcerated or detained in any facility, brought an action or appeal in a court of the United States that was dismissed on the grounds that it is frivolous, malicious, or fails to state a claim upon which relief may be granted, unless the prisoner is under imminent danger of serious physical injury." 28 U.S.C. § 1915(g).

To the best of your knowledge, have you had a case dismissed based on this "three strikes rule"?

☐ Yes
☒ No

FF, Court copy also
 En close different outlines, written better

If so, state which court dismissed your case, when this occurred, and attach a copy of the order if possible.

N/A

A. Have you filed other lawsuits in state or federal court dealing with the same facts involved in this action?

☒ Yes

☐ No

B. If your answer to A is yes, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another page, using the same format.)

1. Parties to the previous lawsuit

Plaintiff(s) Fred Freeman

Defendant(s) Chief Harvey Becker et al
FF, Southern Health Sheriff Lewis et al

2. Court (if federal court, name the district; if state court, name the county and State)

Charleston, South Carolina

3. Docket or index number

CA No. 9-18-2181-DCN-BM

4. Name of Judge assigned to your case

Bristow Marchant

5. Approximate date of filing lawsuit

August 08/2018

6. Is the case still pending?

☒ Yes

☐ No

If no, give the approximate date of disposition.

N/A

#1

7. What was the result of the case? (For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)

Dismissed without prejudice to
give Plaintiff right to refill.

- C. Have you filed other lawsuits in state or federal court otherwise relating to the conditions of your imprisonment?

☐ Yes

☒ No

- D. If your answer to C is yes, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another page, using the same format.)

1. Parties to the previous lawsuit

Plaintiff(s) _____

Defendant(s) _____

N/A

2. Court (if federal court, name the district; if state court, name the county and State)

N/A

3. Docket or index number

N/A

4. Name of Judge assigned to your case

N/A

5. Approximate date of filing lawsuit

N/A

6. Is the case still pending?

☐ Yes

☐ No

N/A

FF.

If no, give the approximate date of disposition. April 22/2019

7. What was the result of the case? (For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)

Dismissed given opportunity to
refile.

IX. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing: 07/07, 2019

Signature of Plaintiff

Printed Name of Plaintiff

Prison Identification #

Prison Address

City

State

Zip Code

Fred Freeman
Fred Freeman
Lieber Corr Inst
P.O. Box 205
Ridgeville, S.C. 29472

B. For Attorneys

Date of signing: _____, 20__.

Signature of Attorney

Printed Name of Attorney

Bar Number

Name of Law Firm